

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|----------|---------|
| FEE DETERMINATION | M.G | | 3/29/00 |
| O.I.P.E. CLASSIFIER | RSC | | 4/1/00 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | 68075310 | |

INDEX OF CLAIMS

| | | | |
|------------------------|------------|---------|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| — (Through numeral)... | Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |

| Claim | Date |
|----------|------------|
| Final | |
| Original | |
| 51 | 14/12/2022 |
| 52 | |
| 53 | |
| 54 | |
| 55 | |
| 56 | |
| 57 | |
| 58 | |
| 59 | |
| 60 | |
| 61 | |
| 62 | |
| 63 | |
| 64 | |
| 65 | |
| 66 | |
| 67 | |
| 68 | |
| 69 | |
| 70 | |
| 71 | |
| 72 | |
| 73 | |
| 74 | NN |
| 75 | |
| 76 | |
| 77 | |
| 78 | |
| 79 | |
| 80 | 0 |
| 81 | ✓ 0 |
| 82 | 0 |
| 83 | ✓ 0 |
| 84 | 0 |
| 85 | ✓ 0 |
| 86 | 0 |
| 87 | ✓ 0 |
| 88 | 0 |
| 89 | ✓ 0 |
| 90 | ✓ 0 |
| 91 | |
| 92 | |
| 93 | NN |
| 94 | |
| 95 | |
| 96 | |
| 97 | |
| 98 | |
| 99 | |
| 100 | |

| Claim | | Date |
|-------|----------|------|
| Final | Original | |
| 101 | | |
| 102 | | |
| 103 | | |
| 104 | | |
| 105 | | |
| 106 | | |
| 107 | | |
| 108 | | |
| 109 | | |
| 110 | | |
| 111 | | |
| 112 | | |
| 113 | | |
| 114 | | |
| 115 | | |
| 116 | | |
| 117 | | |
| 118 | | |
| 119 | | |
| 120 | | |
| 121 | | |
| 122 | | |
| 123 | | |
| 124 | | |
| 125 | | |
| 126 | | |
| 127 | | |
| 128 | | |
| 129 | | |
| 130 | | |
| 131 | | |
| 132 | | |
| 133 | | |
| 134 | | |
| 135 | | |
| 136 | | |
| 137 | | |
| 138 | | |
| 139 | | |
| 140 | | |
| 141 | | |
| 142 | | |
| 143 | | |
| 144 | | |
| 145 | | |
| 146 | | |
| 147 | | |
| 148 | | |
| 149 | | |
| 150 | | |

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)